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**02-20000-28**[Original Effective Date: 11/15/00](#)[Reviewed: 07/25/13](#)[Revised: 01/01/16](#)[Next Review: No Longer Scheduled for Routine Review \(NLR\)](#)

## Subject: Tendon Sheath, Ligament, and Trigger Point Injections

**THIS MEDICAL COVERAGE GUIDELINE IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, OR A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS MEDICAL COVERAGE GUIDELINE APPLIES TO ALL LINES OF BUSINESS UNLESS OTHERWISE NOTED IN THE PROGRAM EXCEPTIONS SECTION.**

[Position Statement](#)[Billing/Coding](#)[Reimbursement](#)[Program Exceptions](#)[Definitions](#)[Related Guidelines](#)[Other](#)[References](#)[Updates](#)

### DESCRIPTION:

Pain is defined as an unpleasant sensory and emotional experience, which may be associated with actual or potential tissue damage. The condition is considered as "chronic pain" when it has been present continuously or intermittently for three months or more.

Myofascial pain may develop from a muscle injury or from excessive strain on a particular muscle or muscle group, ligament or tendon. Injection of a [tendon sheath](#), [ligament](#), or [trigger point](#) with an [anesthetic agent](#) and/or [steroid agent](#) may be indicated for the management of pain.

**NOTE:** When zinc sulfate, psyllium seed oil, combinations of dextrose, glycerine, and phenol, or dextrose alone (D50) is injected into the ligament or surrounding structures, this is Prolotherapy. Prolotherapy is considered **experimental or investigational**. (See [MCG 02-20000-08 Prolotherapy](#)).

### POSITION STATEMENT:

**Tendon sheath and ligament injections (20550, 20551) meet the definition of medical necessity** to relieve pain or dysfunction due to inflammation or pathological changes in the tendon sheath or ligament (e.g. fasciitis, tenosynovitis) when **ALL** of the following are met:

- The initial set of injections may include up to 4 separate dates of service with injections are given no sooner than 1 week apart, **AND**
- For continued injection therapy beyond the initial set of injections (up to 4 separate dates of service), subsequent injection requires that pain reduction of  $\geq 50\%$  for 6 weeks was achieved, **AND**
- Injection therapy has not exceeded 1 year (Medical Director review required after one year of injection therapy).

**Trigger point injections (20552, 20553) meet the definition of medical necessity** to treat trigger points when **ALL** of the following criteria are met:

- Pain after 6 weeks with **ALL** of the following treatments:
  - o NSAIDS  $\geq 4$  weeks (if not contraindicated); **AND**
  - o Activity modification  $\geq 6$  weeks; **AND**
  - o Physical therapy, chiropractic therapy or home exercise program  $\geq 6$  weeks; **OR**
- Worsening pain after 2 weeks with **ALL** of the following treatments:
  - o NSAIDS (if not contraindicated); **AND**
  - o Activity modification; **AND**
  - o Physical therapy, chiropractic therapy or home exercise program; **AND**
- No associated neurological deficit; **AND**
- The initial set of injections may include up to 4 separate dates of service with injections given no sooner than 1 week apart; **AND**
- For continued injection therapy beyond the initial set of injections (up to 4 separate dates of service), each subsequent injection requires that prior injection provided  $\geq 50\%$  pain reduction for 6 weeks; **AND**
- Injection therapy has not exceeded 1 year (Medical Director review is required after one year)

**Imaging guidance (ultrasound or fluoroscopic) performed with tendon sheath injection and ligament injection (20550, 20551) meets the definition of medical necessity.**

**Imaging guidance (ultrasound or fluoroscopic) performed with trigger point injection (20552, 20553) is considered experimental or investigational**, as there is insufficient clinical evidence to permit scientific conclusions on net health outcomes.

**Dry-needling of trigger points is considered experimental or investigational**, as there is insufficient clinical evidence to permit scientific conclusions on net health outcomes.

## BILLING/CODING INFORMATION:

### CPT Coding:

20550	Injection(s); single tendon sheath, or ligament, <a href="#">aponeurosis</a> (e.g., plantar "fascia")
20551	Injection(s); single tendon origin/insertion
20552	Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s)
20553	Injection(s); single or multiple trigger point(s), 3 or more muscles

### ICD-10 Diagnoses Codes That Support Medical Necessity for 20550 – 20551:

**(Effective 10/01/15)**

D48.1	Neoplasm of uncertain behavior of connective and other soft tissue
M25.711 – M25.719	Osteophyte, shoulder
M25.721 – M25.729	Osteophyte, elbow
M25.731 – M25.739	Osteophyte, wrist
M25.741 – M25.749	Osteophyte, hand
M25.751 – M25.759	Osteophyte, hip
M25.761 – M25.769	Osteophyte, knee
M25.771 – M25.776	Osteophyte, ankle or foot
M46.00 – M46.09	Spinal enthesopathy
M46.1	Sacroiliitis, not elsewhere classified
M54.09	Panniculitis affecting regions of neck and back
M54.2	Cervicalgia
M54.5	Low back pain
M54.6	Pain in thoracic spine
M54.89	Other dorsalgia
M54.9	Dorsalgia, unspecified
M60.10 – M60.19	Interstitial myositis
M60.80 – M60.9	Other myositis
M62.40 – M62.49	Contracture of muscle
M62.830 – M62.838	Muscle spasm

M65.311 – M65.359	Trigger finger
M65.4	Radial styloid tenosynovitis [de Quervain]
M65.80	Other synovitis and tenosynovitis, unspecified site
M65.811 – M65.9	Other synovitis and tenosynovitis
M65.841 – M65.849	Other synovitis and tenosynovitis, hand
M65.88	Other synovitis and tenosynovitis, other site
M65.89	Other synovitis and tenosynovitis, multiple sites
M65.9	Synovitis and tenosynovitis, unspecified
M67.30 – M67.39	Transient synovitis
M70.10 – M70.12	Bursitis, hand
M70.20 – M70.22	Olecranon bursitis, elbow
M70.30 – M70.32	Other bursitis of elbow
M70.40 – M70.42	Prepatellar bursitis
M70.50 – M70.52	Other bursitis of knee
M70.60 – M70.62	Trochanteric bursitis, hip
M70.70 – M70.72	Other bursitis of hip
M72.1	Knuckle pads
M72.2	Plantar fascial fibromatosis
M72.4	Pseudosarcomatous fibromatosis
M72.9	Fibroblastic disorders
M75.00 – M75.02	Adhesive capsulitis of shoulder

M75.100 – M75.102 M75.111 - M75.112 M75.121 – M75.122	Unspecified, incomplete or complete rotator cuff tear, not specified as traumatic
M75.20 – M75.22	Bicipital tendinitis
M75.30 – M75.32	Calcific tendinitis of unspecified shoulder
M75.40 – M75.42	Impingement syndrome of shoulder
M75.50 – M75.52	Bursitis of shoulder
M75.80 – M75.92	Other shoulder lesions and shoulder lesion, unspecified
M76.01 – M76.02	Gluteal tendinitis hip
M76.00 – M76.12	Psoas tendinitis, side
M76.20 – M76.22	Iliac crest spur, hip
M76.30 – M76.32	Iliotibial band syndrome
M76.40 – M76.42	Tibial collateral bursitis [Pellegrini-Stieda]
M76.50 – M76.52	Patellar tendinitis
M76.60 – M76.62	Achilles tendinitis
M76.70 – M76.72	Peroneal tendinitis
M76.811 – M76.9	Other specified enthesopathies of the lower limb, except foot
M77.00 – M77.02	Medial epicondylitis, elbow
M77.10 – M77.12	Lateral epicondylitis, elbow
M77.20 – M77.22	Periarthritis, wrist
M77.30 – M77.32	Calcaneal spur
M77.40 – M77.42	Metatarsalgia, foot
M77.50 – M77.52	Other enthesopathy, foot

M77.8	Other enthesopathies, not elsewhere classified
M77.9	Enthesopathy, unspecified

### ICD-10 Diagnoses Codes That Support Medical Necessity for 20552 – 20553: (Effective 10/01/15)

C49.9	Malignant neoplasm of connective and soft tissue, unspecified
M25.721 – M25.729	Osteophyte, elbow
M25.751 – M25.759	Osteophyte, hip
M25.771 – M25.776	Osteophyte, ankle or foot
M35.4	Diffuse (eosinophilic) fasciitis
M46.00 – M46.09	Spinal enthesopathy
M53.82	Other specified dorsopathies, cervical region
M53.9	Dorsopathy, unspecified
M54.00 – M54.09	Panniculitis affecting regions of neck and back,
M54.89	Other dorsalgia
M54.9	Dorsalgia, unspecified
M60.10	Interstitial myositis of unspecified site
M60.111 – M60.179	Interstitial myositis
M60.80 – M60.9	Other myositis
M60.9	Myositis, unspecified
M62.4	Contracture of muscle, unspecified site
M62.411 – M62.49	Contracture of muscle

M62.830 – M62.838	Muscle spasm
M62.89	Other specified disorders of muscle
M65.30	Trigger finger, unspecified finger
M65.311 – M65.359	Trigger finger
M65.4	Radial styloid tenosynovitis [de Quervain]
M65.80	Other synovitis and tenosynovitis, unspecified site
M65.811 – M65.9	Other synovitis and tenosynovitis
M65.841 – M65.849	Other synovitis and tenosynovitis, hand
M65.871 – M65.879	Other synovitis and tenosynovitis, ankle and foot
M65.88	Other synovitis and tenosynovitis, other site
M65.89	Other synovitis and tenosynovitis, multiple sites
M65.9	Synovitis and tenosynovitis, unspecified
M67.30 – M67.39	Transient synovitis
M70.20 – M70.22	Olecranon bursitis, elbow
M70.30 – M70.32	Other bursitis of elbow
M70.60 – M70.62	Trochanteric bursitis, hip
M70.70 – M70.72	Other bursitis of hip
M71.30	Other bursal cyst, unspecified site
M71.38	Other bursal cyst, other site
M71.39	Other bursal cyst, multiple sites
M72.1	Knuckle pads

M72.2	Plantar fascial fibromatosis
M72.4	Pseudosarcomatous fibromatosis
M72.8 – M72.9	Fibroblastic disorders
M75.80 – M75.92	Other shoulder lesions and shoulder lesion, unspecified
M76.10 – M76.12	Psoas tendinitis, side
M76.20 – M76.22	Iliac crest spur, hip
M76.30 – M76.32	Iliotibial band syndrome
M76.60 – M76.62	Achilles tendinitis
M76.70 – M76.72	Peroneal tendinitis
M76.811 – M76.899	Other specified enthesopathies of lower limb, except foot
M76.861 – M76.869	Other enthesopathies, lower leg
M77.00 – M77.02	Medial epicondylitis, elbow
M77.10 – M77.12	Lateral epicondylitis, elbow
M77.30 – M77.32	Calcaneal spur
M77.40 – M77.42	Metatarsalgia, foot
M77.50 – M77.52	Other enthesopathy, foot
M77.9	Enthesopathy, unspecified
M79.1	Myalgia
M79.3	Panniculitis, unspecified
M79.601 – M79.676	Pain in limb
M79.7	Fibromyalgia



## REIMBURSEMENT INFORMATION:

The total number of procedures (20550, 20551, 20552, and 20553), in any combination, is limited to four (4) in a 30-day period and (6) in six months.

The tendon injection codes 20550 and 20551 are to be reported for multiple injections per single tendon or ligament. Multiple injections to the same tendon sheath or ligament would be reported only once per session, while injections to multiple tendon sheaths, tendon origins, tendon insertions, ligaments or aponeuroses would be reported for each injection.

The trigger point injection codes 20552 and 20553 are to be reported once per day, regardless of the number of trigger points or muscles injected. A set of trigger point injections means injections in several trigger points in one sitting.

Imaging guidance should not be reported with trigger point injections (20552 or 20553).

**NOTE:** Services in excess of the limitations shown above are subject to medical review of documentation for determination of medical necessity. The following information may be required documentation to support medical necessity: physician history and physical, physician progress notes, treatment plan, current medications and/or history of medication use, physical therapy assessment and/or progress notes.

## LOINC Codes:

Documentation Table	LOINC Codes	LOINC Time Frame Modifier Code	LOINC Time Frame Modifier Codes Narrative
Physician history and physical	28626-0	18805-2	Include all data of the selected type that represents observations made six months or fewer before starting date of service for the claim.
Attending physician visit note	18733-6	18805-2	Include all data of the selected type that represents observations made six months or fewer before starting date of service for the claim.
Treatment plan	18776-5	18805-2	Include all data of the selected type that represents observations made six months or fewer before starting date of service for the claim.
Current, discharge, or administered medications	34483-8	18805-2	Include all data of the selected type that represents observations made six months or fewer before starting date of service for the claim.
Physical therapy initial assessment	18735-1	18805-2	Include all data of the selected type that represents observations made six months or fewer before starting date of service for the claim.
Physical therapy progress note	11508-9	18805-2	Include all data of the selected type that represents observations made six months or fewer before starting date of service for the claim.

## PROGRAM EXCEPTIONS:

**Federal Employee Program (FEP):** Follow FEP guidelines.

**State Account Organization (SAO):** Follow SAO guidelines.

**Medicare Advantage:** The following Local Coverage Determination (LCD) was reviewed on the last guideline reviewed date:

Injection of Trigger Points ([L33912](#)) located at fcso.com.

## DEFINITIONS:

**Anesthetic agent:** a drug that causes loss of feeling in a part of the body (local, topical anesthesia), or loss of feeling in the entire body and loss of consciousness (general anesthesia).

**Aponeurosis:** a sheet-like tendinous expansion, mainly serving to connect a muscle with the parts it moves.

**Dry needling:** the insertion of a needle into a trigger point without injecting any medication, to try to deactivate the trigger point; the needle is removed and the procedure is often followed by stretching exercises.

**Ligament:** a fibrous connective tissue which attaches bone to bone, serving to hold structures together and keep them stable.

**Steroid agent:** a substance also referred to as corticosteroid, similar to hormones produced by the adrenal gland that fight stress associated with illness and injury; they reduce inflammation and affect the immune system.

**Tendon:** a fibrous connective tissue that attaches muscle to bone or to a structure.

**Tendon sheath:** the white, fibrous covering surrounding a tendon.

**Trigger point:** areas of taut muscle bands or palpable knots of the muscle, that are painful on compression and can produce referred pain, referred tenderness, and/or motor dysfunction.

## RELATED GUIDELINES:

[Prolotherapy, 02-20000-08](#)

[Temporomandibular Joint \(TMJ\) Dysfunction; Diagnosis and Treatment, 02-20000-12](#)

## OTHER:

None applicable.

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## COMMITTEE APPROVAL:

This Medical Coverage Guideline (MCG) was approved by the BCBSF Medical Policy & Coverage Committee on 07/25/13.

## GUIDELINE UPDATE INFORMATION:

09/15/03	Developed separate MCG created for Tendon Sheath, Ligament and Trigger Point Injections from Outpatient Pain Management 02-61000-01.
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01/01/04	Annual HCPCS coding update.
09/15/05	Review and revision of guideline consisting of updated references.
07/15/07	Review, current coverage maintained, guideline reformatted, references updated.
11/15/07	Review and revision of guideline consisting of updated references and addition of diagnosis codes.
01/01/09	Annual HCPCS coding update: revised descriptor for 20552 and 20553.
05/15/09	Scheduled review: update of position statement to include coverage criteria, update of description section to include medical necessity management statement, update reimbursement statement, and references.
09/15/09	Unscheduled review. Update position statement for trigger point injections.
10/15/10	Revision; related ICD-10 codes added.
07/01/11	Revision; formatting changes.
08/15/11	Scheduled review, revise description and ICD9 coding sections; update references, formatting changes.
04/01/12	Revision; updated ICD10 coding with new and revised codes.
09/15/13	Unscheduled review. Revised description, position statement, reimbursement section, program exceptions section and definitions. Updated references. Reformatted guideline.
10/01/15	Revision; updated ICD9 and ICD10 coding sections.
11/01/15	Revision: ICD-9 Codes deleted.
01/01/16	Annual CPT/HCPCS coding update. Revised code 20553 descriptor. Revised Program Exceptions section.

## DECISION TREE

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